

County: Grant  
ST DOMINIC VILLA  
2375 SINSINAWA RD

Facility ID: 8610

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HAZEL GREEN 53811 Phone:(608) 748-9814  
Operated from 1/1 To 12/31 Days of Operation: 366  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/04): 58  
Total Licensed Bed Capacity (12/31/04): 58  
Number of Residents on 12/31/04: 58

Ownership: Nonprofit Church/Corporation  
Highest Level License: Skilled  
Operate in Conjunction with CBRF? No  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 58

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%	
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		24.1	
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		34.5	
Supp. Home Care-Household Services	No	Developmental Disabilities	1.7	Under 65	0.0	More Than 4 Years		41.4	
Day Services	No	Mental Illness (Org./Psy)	58.6	65 - 74	6.9			-----	
Respite Care	No	Mental Illness (Other)	6.9	75 - 84	13.8			100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	63.8	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.7	95 & Over	15.5	Full-Time Equivalent			
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	5.2		100.0	(12/31/04)			
Other Meals	No	Cardiovascular	15.5	65 & Over	100.0	-----			
Transportation	No	Cerebrovascular	6.9		-----	RNs		10.9	
Referral Service	No	Diabetes	0.0	Gender	%	LPNs		7.7	
Other Services	No	Respiratory	0.0	-----	-----	Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	3.4	Male	0.0	Aides, & Orderlies			
Mentally Ill	No	-----	-----	Female	100.0				
Provide Day Programming for			100.0	-----	-----				
Developmentally Disabled	No				100.0				

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#### Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care							
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Skilled Care	1	100.0	305	55	100.0	124	0	0.0	0	2	100.0	140	0	0.0	0	0	0.0	58	100.0
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	1	100.0		55	100.0		0	0.0		2	100.0		0	0.0		0	0.0	58	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	0.0	Bathing	0.0	69.0	31.0	58
Private Home/With Home Health	0.0	Dressing	5.2	67.2	27.6	58
Other Nursing Homes	35.3	Transferring	17.2	58.6	24.1	58
Acute Care Hospitals	0.0	Toilet Use	15.5	36.2	48.3	58
Psych. Hosp.-MR/DD Facilities	0.0	Eating	55.2	36.2	8.6	58
Rehabilitation Hospitals	0.0	*****				
Other Locations	64.7					
Total Number of Admissions	17	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	0.0		Receiving Respiratory Care	3.4
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	67.2		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	25.9		Receiving Suctioning	0.0
Other Nursing Homes	0.0				Receiving Ostomy Care	0.0
Acute Care Hospitals	0.0	Mobility			Receiving Tube Feeding	0.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0		Receiving Mechanically Altered Diets	19.0
Rehabilitation Hospitals	0.0				Other Resident Characteristics	
Other Locations	0.0	Skin Care			Have Advance Directives	100.0
Deaths	100.0	With Pressure Sores	3.4		Medications	
Total Number of Discharges		With Rashes	5.2		Receiving Psychoactive Drugs	60.3
(Including Deaths)	17					

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Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities  
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	This Facility %	Ownership: Nonprofit Peer %	Group Ratio	Bed Size: 50-99 Peer %	Ratio	Licensure: Skilled Peer %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	100.0	94.4	1.06	88.5	1.13	87.7	1.14	88.8	1.13
Current Residents from In-County	98.3	77.1	1.27	72.5	1.36	70.1	1.40	77.4	1.27
Admissions from In-County, Still Residing	76.5	24.2	3.16	19.6	3.89	21.3	3.58	19.4	3.94
Admissions/Average Daily Census	29.3	115.9	0.25	144.1	0.20	116.7	0.25	146.5	0.20
Discharges/Average Daily Census	29.3	115.5	0.25	142.5	0.21	117.9	0.25	148.0	0.20
Discharges To Private Residence/Average Daily Census	0.0	46.1	0.00	59.0	0.00	49.0	0.00	66.9	0.00
Residents Receiving Skilled Care	100	97.0	1.03	95.0	1.05	93.5	1.07	89.9	1.11
Residents Aged 65 and Older	100	97.0	1.03	94.5	1.06	92.7	1.08	87.9	1.14
Title 19 (Medicaid) Funded Residents	94.8	64.4	1.47	66.3	1.43	68.9	1.38	66.1	1.44
Private Pay Funded Residents	3.4	24.7	0.14	20.8	0.17	19.5	0.18	20.6	0.17
Developmentally Disabled Residents	1.7	0.5	3.41	0.4	4.64	0.5	3.50	6.0	0.29
Mentally Ill Residents	65.5	35.9	1.82	32.3	2.03	36.0	1.82	33.6	1.95
General Medical Service Residents	3.4	24.7	0.14	25.9	0.13	25.3	0.14	21.1	0.16
Impaired ADL (Mean)	55.2	50.8	1.09	49.7	1.11	48.1	1.15	49.4	1.12
Psychological Problems	60.3	59.4	1.02	60.4	1.00	61.7	0.98	57.7	1.05
Nursing Care Required (Mean)	3.9	6.8	0.57	6.5	0.60	7.2	0.54	7.4	0.52